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## BIB DATA SHEET

CONFIRMATION NO. 8537

|   |   |  |                                 |  |                           |                                |
|---|---|--|---------------------------------|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/732,978  | <b>FILING or 371(c) DATE</b><br>12/11/2003<br><b>RULE</b>   | <b>CLASS</b><br>712  | <b>GROUP ART UNIT</b><br>2618   | <b>ATTORNEY DOCKET NO.</b><br>TI-36617                       |                           |                                |
| <b>APPLICANTS</b><br>Eko N. Onggosanusi, Allen, TX;<br>Timothy M. Schmidl, Dallas, TX;<br>Anand G. Dabak, Plano, TX;<br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/480,703 06/23/2003<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>03/16/2004 |   |  |                                 |  |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/MARCEAU MILORD/</u><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>MM<br>Initials | <b>STATE OR COUNTRY</b><br>TX   | <b>SHEETS DRAWINGS</b><br>5                                  | <b>TOTAL CLAIMS</b><br>32 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>TEXAS INSTRUMENTS INCORPORATED<br>P O BOX 655474, M/S 3999<br>DALLAS, TX 75265  |   |  |                                 |  |                           |                                |
| <b>TITLE</b><br>Multiuser detection for wireless communications systems in the presence of interference   |   |  |                                 |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>1786  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                 | <input type="checkbox"/> All Fees                            |                           |                                |
|   |   |  |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|   |   |  |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|   |   |  |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|   |   |  |                                 | <input type="checkbox"/> Other _____                         |                           |                                |
|   |   |  | <input type="checkbox"/> Credit |  |                           |                                |